

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 14-R-0154  
CUSTOMER NUMBER: 148

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Baystate Medical Center  
759 Chestnut Street  
Springfield, MA 01199

Telephone: (413)-794-4356

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not ye<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|---|--|---|--|
| 4. Dogs   |   |   |  |   |  |
| 5. Cats   |   |   |  |   |  |
| 6. Guinea Pigs  |   |   |  |   |  |
| 7. Hamsters   |   |   |  |   |  |
| 8. Rabbits  |   |   |  |   |  |
| 9. Non-human Primates   |   |   |  |   |  |
| 10. Sheep   |   |   |  |   |  |
| 11. Pigs  | 52  |   | 52   |   | 52   |
| 12. Other Farm Animals  |   |   |  |   |  |
|   |   |   |  |   |  |
| 13. Other Animals   |   |   |  |   |  |
|   |   |   |  |   |  |
|   |   |   |  |   |  |
|   |   |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary ink brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Warren E Foot*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

WARREN E FOOT

DATE SIGNED

11/17/03

DEC 01 2003

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21:

See attached form for additional information.

Interagency Report Control No.: *FSM*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 14-R-0155  
CUSTOMER NUMBER: 13275

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Massachusetts College Of Pharmacy & Health  
179 Longwood Ave  
Boston, MA 02115

Telephone: (617) -732-2942

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | NA   |   |  |   |  |
| 5. Cats   | NA   |   |  |   |  |
| 6. Guinea Pigs  | NA   |   |  |   |  |
| 7. Hamsters   | 0  | 0   | 634  | 0   | 634  |
| 8. Rabbits  | NA   |   |  |   |  |
| 9. Non-human Primates   | NA   |   |  |   |  |
| 10. Sheep   | NA   |   |  |   |  |
| 11. Pigs  | NA   |   |  |   |  |
| 12. Other Farm Animals  | NA   |   |  |   |  |
| 13. Other Animals   | NA   |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Charles F. Monahan, Jr., President

11/25/03

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88) which is obsolete.)

( AUG 91 )

11/25/03

DEC 01 2003

See attached form for additional information.

Interagency Report Control No.:

25m

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 14-R-0156  
CUSTOMER NUMBER: 749

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Capralogics, Inc.  
235 Czeski Road  
Hardwick, MA 01037

Telephone: (413) -477-6866

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  | 20   |   | 457  |   | 477  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   | 7  |   | 9  |   | 16   |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| Goats   | 29   |   | 53   |   | 82   |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Stanley D. White*

STANLEY D. WHITE, CEO

11/24/03

DEC 01 2003

See attached form for additional information.

Interagency Report Control No. *cp*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 14-R-0157  
CUSTOMER NUMBER: 14167

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
(TYPE OR PRINT)

Cell Signaling Technology, Inc.  
166 B Cummings Center  
Beverly, MA 01915

Telephone: (978) -867-2300

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

166 B Cummings Center

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals and<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for which<br>the use of appropriate anesthetic, analgesic, or tranquiliz-<br>ing drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. (An explanation of the<br>procedures producing pain or distress in these animals and<br>the reasons such drugs were not used must be attached<br>to this report). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>(COLUMNS<br>C + D + E) |
|---|--|---|---|--|--|
| 4. Dogs   | 0  | 0   | 0   | 0  |  |
| 5. Cats   |  |   |   |  |  |
| 6. Guinea Pigs  |  |   |   |  |  |
| 7. Hamsters   |  |   |   |  |  |
| 8. Rabbits  |  |   | 67  |  | 67   |
| 9. Non-human Primates   |  |   | 0   |  |  |
| 10. Sheep   |  |   |   |  |  |
| 11. Pigs  |  |   |   |  |  |
| 12. Other Farm Animals  |  |   |   |  |  |
| 13. Other Animals   |  |   |   |  |  |
|   |  |   |   |  |  |
|   |  |   |   |  |  |
|   |  |   |   |  |  |

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

*Michael Comb*

Michael Comb, CEO

11/24/03

OCT 07 2003

See attached form for additional information.

Interagency Report Control No.: *qp*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 14-R-0159  
CUSTOMER NUMBER: 16296

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Bristol-Myers Squibb Medical Imaging, Inc  
331 Treble Cove Road  
North Billerica, MA 01862

Telephone: (800) -362-2668

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing *N. Billerica MA Bldg 500*

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   | 23   |   | 23   |
| 5. Cats   |  |   |  |   | 0  |
| 6. Guinea Pigs  |  |   |  |   | 0  |
| 7. Hamsters   |  |   |  |   | 0  |
| 8. Rabbits  | 8  |   | 131  |   | 139  |
| 9. Non-human Primates   | 4  |   |  |   | 4  |
| 10. Sheep   |  |   |  |   | 0  |
| 11. Pigs  |  |   |  |   | 0  |
| 12. Other Farm Animals  |  |   |  |   | 0  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*D. Scott Edwards*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

D. SCOTT EDWARDS, Ex. DIRECTOR

DATE SIGNED

10/6/03

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 14-R-0160  
CUSTOMER NUMBER: 10943

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Tga Sciences, Inc.  
47 Hall Street  
Medford, MA 02155

Telephone: (781) -393-6910

SEP 29 2003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

*The only facility in use is at:  
47 Hall St, Medford, MA 02155*

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not ye<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|---|--|---|--|
| 4. Dogs   | 0   |   |  |   | 0  |
| 5. Cats   | 0   |   |  |   | 0  |
| 6. Guinea Pigs  | 0   |   |  |   | 0  |
| 7. Hamsters   | 0   |   |  |   | 0  |
| 8. Rabbits  | 0   |   |  |   | 0  |
| 9. Non-human Primates   | 0   |   |  |   | 0  |
| 10. Sheep   | 0   |   |  |   | 0  |
| 11. Pigs  | 0   |   |  |   | 0  |
| 12. Other Farm Animals  | 0   |   |  |   | 0  |
| 13. Other Animals   | 0   |   |  |   | 0  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Michael Settles*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

*Michael Settles President*

DATE SIGNED

*9-22-03*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 14-R-0161  
CUSTOMER NUMBER: 1658

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Tranxenogen, Inc.  
800 Boston Turnpike  
Shrewsbury, MA 01545

NOV 07 2003

Telephone: (508) -842-5036

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  | 2  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*George Uveges Pres CEO*

*George Uveges*  
*President & CEO*

*Nov 3, 2003*

Customer ID and Site Address:

ID: 1658

800 Boston Turnpike  
Shrewsbury, MA 01545  
County: Worcester

Telephone



Customer ID and Site Address:

ID: 1658

299 East Main St  
Norton, MA 02766  
County: Bristol

Telephone

*no longer using this site*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 14-R-0162  
CUSTOMER NUMBER: 17008

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Nucryst Pharmaceuticals  
50 Audubon Rd  
Suite B  
Wakefield, MA 01880

Telephone: (781) -246-6053

OCT 20 2003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   | 788  |   | 788  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Paul J. Schechter, MD, Ph.D

VP, Drug Development and Regulatory Affairs,  
Chief Medical Officer

NOV 14 2003

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 14-R-0164  
CUSTOMER NUMBER: 21373

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Novartis Institutes for BioMedical Research, Inc.  
400 Technology Square  
Cambridge, MA 02139

Telephone: (617) -871-3200

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  | 605   | 29   |   | 634  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*B. Aebischer*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Bernard Aebischer, Ph.D.

DATE SIGNED

11-7-03

Customer ID and Site Address:

ID: 21373

100 Technology  
Square

Cambridge, MA 02139

County: Middlesex

Telephone

DEC 01 2003

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 14-R-0165  
CUSTOMER NUMBER: 10803

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
(TYPE OR PRINT)

Paratek  
75 Kneeland St  
Boston, MA 02111

Telephone: (617) -275-0040

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

75 KNEELAND ST  
BOSTON, MA 02111

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   | 1  | NONE  | 80   |   | 80   |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

S. KEN TANAKA, Ph.D.  
VICE PRESIDENT, RESEARCH & DEVELOPMENT

11/25/03

Customer ID and Site Address:

ID: 10803

75 Kneeland St

4th Floor

Boston, MA 02111

County: Suffolk

Telephone

(617)275-0040

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 15-R-0014  
CUSTOMER NUMBER: 272

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Ethide Laboratories, Inc.  
91 Hill Farm Road  
Coventry, RI 02816

Telephone: (401) -397-5602

NOV 20 2003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

Animal Lab

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquil<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  | 2  | 0   | 0  | 0   | 0  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Joseph M. Mello, President

11/19/03

RECEIVED DEC 12 2003

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 15-R-0018  
CUSTOMER NUMBER: 1771

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
(TYPE OR PRINT)

Domani, Inc.  
1334 Main Road  
Tiverton, RI 02878

Telephone: (401) -624-3207

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals and<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for which<br>the use of appropriate anesthetic, analgesic, or tranquiliz-<br>ing drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals and<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|---|---|--|
| 4. Dogs   | 0  | 0   | 0   | 0   | 0  |
| 5. Cats   | 0  | 0   | 0   | 0   | 0  |
| 6. Guinea Pigs  | 0  | 0   | 0   | 0   | 0  |
| 7. Hamsters   | 0  | 0   | 0   | 0   | 0  |
| 8. Rabbits  | 0  | 0   | 0   | 0   | 0  |
| 9. Non-human Primates   | 0  | 0   | 0   | 0   | 0  |
| 10. Sheep   | 0  | 0   | 0   | 0   | 0  |
| 11. Pigs  | 0  | 0   | 0   | 0   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0   | 0   | 0  |
| 13. Other Animals   | 0  | 0   | 0   | 0   | 0  |
| The company is closed and the facility is not in use.         |  |   |   |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

Anthony H. Ciuatta as shareholder

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

Anthony H. Ciuatta, shareholder

DATE SIGNED

10/2/03



OCT 27 2003

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 15-R-0019  
CUSTOMER NUMBER: 10818

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Sention, Inc.  
1 Richmond Sq, 4th Floor  
Providence, RI 02906

Telephone: (401) -272-7177

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 0   | 0  | 0   | 0  |
| 5. Cats   | 0  | 0   | 0  | 0   | 0  |
| 6. Guinea Pigs  | 0  | 0   | 0  | 0   | 0  |
| 7. Hamsters   | 0  | 0   | 0  | 0   | 0  |
| 8. Rabbits  | 0  | 0   | 0  | 0   | 0  |
| 9. Non-human Primates   | 0  | 0   | 0  | 0   | 0  |
| 10. Sheep   | 0  | 0   | 0  | 0   | 0  |
| 11. Pigs  | 0  | 0   | 0  | 0   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0  | 0   | 0  |
|   |  | 0   | 0  | 0   | 0  |
| 13. Other Animals   | 0  | 0   | 0  | 0   | 0  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print ) I.O.

DATE SIGNED

David Mantus, Ph.D., V.P. Regulatory Affairs

10/17/03

Customer ID and Site Address:

ID: 10818

1 Richmond Sq 4th  
Floor  
Providence, RI 02906  
County: Providence

Telephone  
(401)272-7177

4 Richmond Square, 4th Floor  
Providence RI 02906

mailing address

Animal Facility Address

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.  
16-R-0003

CUSTOMER NO.  
49

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

WESLEYAN UNIVERSITY  
OFFICE OF ACADEMIC AFFAIRS  
MIDDLETOWN, CT 06459  
(203) 685-2010

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

**FACILITY LOCATIONS(sites)**

See Attached Listing

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY** (Attach additional sheets if necessary or use APHIS FORM 7023A)

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred,<br>conditioned, or<br>held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not<br>yet used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no<br>pain, distress, or<br>use of pain-<br>relieving drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals<br>and for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching,<br>experiments, research, surgery or tests were<br>conducted involving accompanying pain or distress<br>to the animals and for which the use of appropriate<br>anesthetic, analgesic, or tranquilizing drugs would<br>have adversely affected the procedures, results, or<br>interpretation of the teaching, research,<br>experiments, surgery, or tests. (An explanation of<br>the procedures producing pain or distress in these<br>animals and the reasons such drugs were not used<br>must be attached to this report) | F.<br>TOTAL NO.<br>OF ANIMALS<br><br>(Cols. C +<br>D + E) |
|---|---|--|---|--|---|
| 4. Dogs   |   |  |   |  |   |
| 5. Cats   |   |  |   |  |   |
| 6. Guinea Pigs  |   |  |   |  |   |
| 7. Hamsters   |   |  |   |  |   |
| 8. Rabbits  |   |  |   |  |   |
| 9. Non-Human Primates   |   |  |   |  |   |
| 10. Sheep   |   |  |   |  |   |
| 11. Pigs  |   |  |   |  |   |
| 12. Other Farm Animals  |   |  |   |  |   |
|   |   |  |   |  |   |
| 13. Other Animals   |   |  |   |  |   |
|   |   |  |   |  |   |
|   |   |  |   |  |   |
|   |   |  |   |  |   |
|   |   |  |   |  |   |


**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**

(Chief Executive Officer or Legally Responsible Institutional official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL                                       | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
|---|--|-------------|
|  | Judith C. Brown<br>Vice-President for Academic Affairs           | 10/1/03     |

APHIS Form 7023 Site List

The following sites have been reported by the facility.

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Registration Number: 16-R-0003  
Customer Number: 49  
Facility: WESLEYAN UNIVERSITY  
OFFICE OF ACADEMIC AFFAIRS  
MIDDLETOWN, CT 06459  
(203) 685-2010

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WESLEYAN UNIVERSITY  
HALL-ATWATER AND SHANKLIN LABS, JUDD HALL  
MIDDLETOWN, CT 06459

DEC 01 2003

See attached form for additional information.

Interagency Report Control No. *40*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0004  
CUSTOMER NUMBER: 50

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

John B. Pierce Laboratory, Inc.  
290 Congress Avenue  
New Haven, CT 06519

Telephone: (203) -562-9901

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 0   | 0  |   | 0  |
| 5. Cats   | 0  | 0   | 0  |   | 0  |
| 6. Guinea Pigs  | 0  | 0   | 0  |   | 0  |
| 7. Hamsters   | 0  | 0   | 291  |   | 291  |
| 8. Rabbits  | 0  | 0   | 0  |   | 0  |
| 9. Non-human Primates   | 0  | 0   | 0  |   | 0  |
| 10. Sheep   | 0  |   | 0  |   | 0  |
| 11. Pigs  | 0  | 0   | 0  |   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0  |   | 0  |
|   |  |   |  |   |  |
| 13. Other Animals   | 0  | 0   | 0  |   | 0  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Lawrence E Marks*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

LAWRENCE E MARKS Ph.D.  
DIRECTOR, JOHN B. PIERCE LAB. INC.

DATE SIGNED

11/24/03

NOV 24 2003

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21:

See attached form for additional information.

Interagency Report Control No. *4*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0008  
CUSTOMER NUMBER: 52

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

University Of Connecticut  
Vice Provost For Research And Graduate Education  
438 Whitney Road Ext. Unit 1006  
Storrs, CT 06269

Telephone: (860) -486-3619

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals and<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|---|---|--|
| 4. Dogs   | 0  | 0   | 0   | 0   | 0  |
| 5. Cats   | 0  | 32  | 2   | 0   | 34   |
| 6. Guinea Pigs  | 0  | 2   | 0   | 0   | 2  |
| 7. Hamsters   | 0  | 0   | 0   | 0   | 0  |
| 8. Rabbits  | 72   | 31  | 30  | 0   | 61   |
| 9. Non-human Primates   | 0  | 0   | 0   | 0   | 0  |
| 10. Sheep   | 0  | 0   | 0   | 0   | 0  |
| 11. Pigs  | 0  | 18  | 0   | 0   | 18   |
| 12. Other Farm Animals  | -  | -   | -   | -   | -  |
| Dairy Cattle  | 0  | 4   | 0   | 0   | 4  |
| 13. Other Animals   | -  | -   | -   | -   | -  |
| Monodelphis   | 0  | 7   | 0   | 0   | 7  |
| White-tailed  | 0  | 0   | 52  | 0   | 52   |
| Deer  | 0  | 0   | 0   | 0   | 0  |
| Raccoons  | 0  | 0   | 8   | 0   | 8  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Janet L. Greger*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Janet L. Greger, Vice Provost for  
Research and Graduate Education

DATE SIGNED

NOV 24 2003

**This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.**

**See reverse side for additional information.**

**Interagency Report Control No.**  
**0180-DOA-AN**

**UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE**

1. REGISTRATION NO.

16-R-0008

FORM APPROVED  
OMB NO. 0579-0036

**CONTINUATION SHEET FOR ANNUAL REPORT  
OF RESEARCH FACILITY  
( TYPE OR PRINT )**

**2. HEADQUARTERS RESEARCH FACILITY** (Name and Address, as registered with USDA, include Zip Code)

University of Connecticut  
Vice Provost for Research & Graduate Education  
438 Whitney Road Ext. Unit 1006  
Storrs, CT 06269

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY** (Attach additional sheets if necessary or use this form.)

[illegible]

## ASSURANCE STATEMENTS

- 1). Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2). Each principal investigator has considered alternatives to painful procedures.
- 3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL**  
(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

**SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL**

Janet L Greer

NAME &amp; TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICER (Type or Print)  
Janet L. Greger, Vice Provost for  
Research and Graduate Education

**DATE SIGNED**

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0010  
CUSTOMER NUMBER: 467

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
(TYPE OR PRINT)

Alexion Pharmaceuticals, Inc.  
352 Knotter Drive  
Cheshire, CT 06410  
  
Telephone: (203) -272-2596

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred,<br>conditioned, or<br>held for use in<br>teaching,<br>testing,<br>experiments,<br>research, or<br>surgery but not yet | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no<br>pain, distress, or<br>use of pain-<br>relieving drugs. | D. Number of animals<br>upon which<br>experiments, teaching,<br>research, surgery, or<br>tests were conducted<br>involving<br>accompanying pain or<br>distress to the animals<br>and for which<br>appropriate anesthetic, a | E. Number of animals upon which teaching,<br>experiments, research, surgery or tests were<br>conducted involving accompanying pain or distress<br>to the animals and for which the use of appropriate<br>anesthetic, analgesic, or tranquilizing drugs would<br>have adversely affected the procedures, results, or<br>interpretation of the teaching, research, experiments,<br>surgery, or tests. ( An explanation of the procedures<br>producing pain or distress in these animals and the<br>reasons such drugs were not used must be attached to | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|--|---|---|--|
| 4. Dogs   |  |  |   |   |  |
| 5. Cats   |  |  |   |   |  |
| 6. Guinea Pigs  |  |  |   |   |  |
| 7. Hamsters   |  |  |   |   |  |
| 8. Rabbits  |  |  |   |   |  |
| 9. Non-human Primate  |  |  |   |   |  |
| 10. Sheep   |  |  |   |   |  |
| 11. Pigs  | 7  |  |   |   | 7  |
| 12. Other Farm Animals  |  |  |   |   |  |
|   |  |  |   |   |  |
| 13. Other Animals   |  |  |   |   |  |
|   |  |  |   |   |  |
|   |  |  |   |   |  |
|   |  |  |   |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print

DATE SIGNED

David Keiser, President & COO

11/21/03



UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0011  
CUSTOMER NUMBER: 43

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

University Of Hartford  
200 Bloomfield Avenue  
West Hartford, CT 06117

*DEC 29 2003*

Telephone: (860) -768-4544

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 0   | 0  |   | 0  |
| 5. Cats   | 0  | 0   | 0  |   | 0  |
| 6. Guinea Pigs  | 0  | 0   | 0  |   | 0  |
| 7. Hamsters   | 0  | 0   | 0  |   | 0  |
| 8. Rabbits  | 0  | 0   | 0  |   | 0  |
| 9. Non-human Primates   | 0  | 0   | 0  |   | 0  |
| 10. Sheep   | 0  | 0   | 0  |   | 0  |
| 11. Pigs  | 0  | 0   | 0  |   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0  |   | 0  |
| 13. Other Animals   | 0  | 0   | 0  |   | 0  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*[Signature]*

Dean of College of Arts & Sciences

12/16/03

OCT 14 2003

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0015

CUSTOMER NUMBER: 812

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
( TYPE OR PRINT )

Trinity College  
Trinity College  
300 Summit Street  
Hartford, CT 06106

Telephone: (860) -297-2224

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )**

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  | 0  | 0   |  |   | 0  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*C. Miller Brown*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

*C. Miller Brown, Director of Facility*

DATE SIGNED

*9/30/03*

Customer ID and Site Address:

ID: 812

Trinity College  
Hartford, CT 06106  
County: Hartford

Telephone

Customer ID and Site Address:

ID:812

Trinity College  
300 Summit Street  
Hartford, CT 06106  
County: Hartford

Telephone  
(860)297-2215

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0017

CUSTOMER NUMBER: 39

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Connecticut College  
270 Mohegan Avenue  
New London, CT 06320

Telephone: (860) -439-2339

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

Psychology Department (Bill Hall) FACILITY LOCATIONS ( Sites ) - See Attached Listing  
Connecticut College

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  | No regulated laboratory<br>species  |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Norman Fainstein*  
Dr. Norman Fainstein  
President

*11/20/03*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. **Customer #**  
**16-R-0025 44**

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA Include Zip Code)

University of Connecticut Health CTR.  
263 Farmington Avenue, MC 3980  
Farmington, CT 06030-3980  
860-679-2731

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.) **Center for Laboratory Animal Care, University of CT Health CTR.**

FACILITY LOCATIONS (Sites)

263 Farmington Ave, MC 3980  
Farmington, CT 06030-3980

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used | E. Number of animals upon which teaching experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in those animals and the reasons such drugs were not used must be attached to this report) | F. TOTAL NO OF ANIMALS (Cols. C + D + E) |
|--|--|---|--|--|--|
| 4. Dogs  | 0  | 0   | 0  | 0  | 0  |
| 5. Cats  | 0  | 0   | 14   | 0  | 14                                       |
| 6. Guinea Pigs                                       | 0  | 0   | 151  | 0  | 151                                      |
| 7. Hamsters  | 0  | 0   | 28   | 0  | 28                                       |
| 8. Rabbits   | 0  | 0   | 99   | 0  | 99                                       |
| 9. Non-human Primates                                | 0  | 0   | 3  | 0  | 3  |
| 10. Sheep  | 0  | 0   | 0  | 0  | 0  |
| 11. Pigs   | 0  | 0   | 0  | 0  | 0  |
| 12. Other Farm Animals                               |  |   |  |  |  |
| Chickens   | 0  | 0   | 10   | 0  | 10                                       |
| 13 Other Animals                                     |  |   |  |  |  |
| Chinchilla   | 0  | 0   | 40   | 0  | 40                                       |
| Gerbils  | 0  | 0   | 0  | 0  | 0  |
| Frogs  | 0  | 0   | 67   | 0  | 67                                       |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer or Legally Responsible Institutional Official)  
I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF CEO OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF CEO OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

Leonard P. Paplauskas, Associate  
Vice President for Research

1/25/03

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0026

CUSTOMER NUMBER: 46

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Quinnipiac University  
Mt. Carmel Avenue  
P.O. Box 125  
Hamden, CT 06518

OCT 17 2003

Telephone: (203) -582-8958

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

Vivarium - Buckman Center

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 2   | 2  |   | 4  |
| 5. Cats   | 0  | 3   | 0  |   | 3  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   | 0  | 20  | 0  |   | 20   |
| 8. Rabbits  | 0  | 3   | 1  |   | 4  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Gerbils   | 0  | 20  | 0  |   | 20   |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

John L. Lahey, President

10/8/03

OCT 31 2003

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0028

CUSTOMER NUMBER: 35

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

U.S. Surgical Corporation  
150 Glover Avenue  
Norwalk, CT 06856

Telephone: (203) -845-1000

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| Dogs  |  |   | 186  |   | 186  |
| Cats  |  |   |  |   |  |
| Guinea Pigs   |  |   |  |   |  |
| Hamsters  |  |   |  |   |  |
| Rabbits   |  |   |  |   |  |
| Non-human Primates  |  |   |  |   |  |
| Sheep   |  |   | 1  |   | 1  |
| Pigs  |  |   | 176  |   | 176  |
| Other Farm Animals  |  |   |  |   |  |
|   |  |   |  |   |  |
| Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  | total   | 363  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Alan Panzer, President USS

10/22/03



UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0031  
CUSTOMER NUMBER: 56

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
(TYPE OR PRINT)

Sea Research Foundation, Inc.  
Mystic Aquarium  
55 Coogan Boulevard  
Mystic, CT 06355

Telephone: (860) -572-5955

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B.<br>Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C.<br>Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D.<br>Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E.<br>Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. (An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>(COLUMNS<br>C + D + E) |
|---|---|--|---|--|--|
| 4. Dogs   |   |  |   |  |  |
| 5. Cats   |   |  |   |  |  |
| 6. Guinea Pigs  |   |  |   |  |  |
| 7. Hamsters   |   |  |   |  |  |
| 8. Rabbits  |   |  |   |  |  |
| 9. Non-human Primates   |   |  |   |  |  |
| 10. Sheep   |   |  |   |  |  |
| 11. Pigs  |   |  |   |  |  |
| 12. Other Farm Animals  |   |  |   |  |  |
| 13. Other Animals - MARINE MAMMALS                            |   |  |   |  |  |
| Northern fur seal   | 0   | 14   | 0   | 0  | 14   |
| Harbor seal   | 0   | 5  | 0   | 0  | 5  |
| California sealion  | 0   | 4  | 0   | 0  | 4  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

Neal A. Overstrom, President

31 OCT 93

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0031  
CUSTOMER NUMBER: 56

FORM APPROVED  
OMB NO. 0579-0036

Continuation Sheet for  
ANNUAL REPORT OF RESEARCH FACILITY  
(TYPE OR PRINT)

Sea Research Foundation, Inc.  
Mystic Aquarium  
55 Coogan Boulevard  
Mystic, CT 06355

Telephone: (203) -572-5955

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals - Marine mammals - continued                    |  |   |  |   |  |
| Steller sea lion  | 0  | 7   | 0  | 0   | 7  |
| Beluga whale  | 0  | 6   | 0  | 0   | 6  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED



Neal A. Overstrom, President

31 OCT 93

Customer ID and Site Address:

ID: 56

55 Coogan Boulevard  
Mystic, CT 06355 1997  
County: New London

Telephone  
(860)572-5955

OCT 09 2003

See attached form for additional information.

Interagency Report Control No. 90

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0039  
CUSTOMER NUMBER: 61

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

C T Agriculture Experiment Station, The  
123 Huntington Street  
Box 1106  
New Haven, CT 06504

Telephone: (203) -974-8485

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not ye<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|---|--|---|--|
| 4. Dogs   |   |   |  |   |  |
| 5. Cats   |   |   |  |   |  |
| 6. Guinea Pigs  |   | 8   |  |   | 8  |
| 7. Hamsters   |   |   | 51   |   | 51   |
| 8. Rabbits  |   | 3   |  |   | 3  |
| 9. Non-human Primates   |   |   |  |   |  |
| 10. Sheep   |   |   |  |   |  |
| 11. Pigs  |   |   |  |   |  |
| 12. Other Farm Animals  |   |   |  |   |  |
| 13. Other Animals   |   |   |  |   |  |
| Gerbil  |   | 1   |  |   | 1  |
| White-footed mice   |   |   | 285  |   | 285  |
| Chipmunks   |   |   | 23   |   | 23   |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

John F. Anderson, Director

10-1-03

Interagency Report Control No.  
0180-DOA-AN

**UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE**

1. REGISTRATION NO.

16-R-0039

FORM APPROVED  
OMB NO. 0579-0036

**CONTINUATION SHEET FOR ANNUAL REPORT  
OF RESEARCH FACILITY  
( TYPE OR PRINT )**

**2. HEADQUARTERS RESEARCH FACILITY** (Name and Address, as registered with USDA, include Zip Code)

CT Agricultural Experiment Station  
123 Huntington Street, Box 1106  
New Haven, CT 06504

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY** (Attach additional sheets if necessary or use this form.)

[illegible]

## ASSURANCE STATEMENTS

- 1). Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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- 3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL**  
(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

**SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL**

NAME &amp; TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED \_\_\_\_\_

John F. Anderson, Director

10-1-03

DEC 11 2003

See attached form for additional information.

Interagency Report Control No. *gpn*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0040  
CUSTOMER NUMBER: 10301

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Northwestern C T Community College  
Park Place East  
Winsted, CT 06098

Telephone: (860) -738-6483

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

Northwestern CT Community College Joyner Learning Center Park Place East Winsted, CT 06098  
FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  | —   |  |   | —  |
| 5. Cats   |  | 4   |  |   | 4  |
| 6. Guinea Pigs  |  | 2   |  |   | 2  |
| 7. Hamsters   |  | —   |  |   | —  |
| 8. Rabbits  |  | 1   |  |   | 1  |
| 9. Non-human Primates   |  | —   |  |   | —  |
| 10. Sheep   |  | —   |  |   | —  |
| 11. Pigs  |  | —   |  |   | —  |
| 12. Other Farm Animals  |  | —   |  |   | —  |
| 13. Other Animals   |  | —   |  |   | —  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*R. Eileen Baccus*

Dr. R. Eileen Baccus, President

11-20-03

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.  
16-R-0042

CUSTOMER NO.  
15694

FORM APPROVED  
OMB NO. 0579-0036

# ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

AMERICAN INTEGRATED BIOLOGICS INC  
P O BOX 252  
EAST WOODSTOCK, CT 06244  
(860) 963-2612

OCT 27 2003

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

## FACILITY LOCATIONS(sites)

See Attached Listing

Millbrook ImmunoSense, Amherst, MA 14-R-00062 - holds pigs for Amer. Int. Bid.

Sherman Farm, Woodstock, CT - houses Cattle (1 Bull)

## REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report) | F. TOTAL NO. OF ANIMALS (Cols. C + D + E) |
|--|---|---|---|--|---|
| 4. Dogs  |   |   |   |  |   |
| 5. Cats  |   |   |   |  |   |
| 6. Guinea Pigs                                       |   |   |   |  |   |
| 7. Hamsters  |   |   |   |  |   |
| 8. Rabbits   |   |   |   |  |   |
| 9. Non-Human Primates                                |   |   |   |  |   |
| 10. Sheep  |   |   |   |  |   |
| 11. Pigs   | 4   |   |   |  | 4   |
| 12. Other Farm Animals                               | 1   |   |   |  | 1   |
| 13. Other Animals                                    |   |   |   |  |   |

## ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

## CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer or Legally Responsible Institutional official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

*Jeffrey P. Erickson, PhD*

JEFFREY P. ERICKSON, PhD - President & COO

10/24/03

NOV 24 2003

See attached form for additional information.

Interagency Report Control No. *gpr*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0043  
CUSTOMER NUMBER: 20877

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Institute For Pharmaceutical Discovery Llc  
Vice President Of Operations  
23 Business Park Drive  
Branford, CT 06405

Telephone: (203) -315-5973

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals and<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|---|---|--|
| 4. Dogs   |  |   |   |   |  |
| 5. Cats   |  |   |   |   |  |
| 6. Guinea Pigs  |  |   |   |   |  |
| 7. Hamsters   |  |   |   |   |  |
| 8. Rabbits  |  |   | 24  |   | 24   |
| 9. Non-human Primates   |  |   |   |   |  |
| 10. Sheep   |  |   |   |   |  |
| 11. Pigs  |  |   |   |   |  |
| 12. Other Farm Animals  |  |   |   |   |  |
| 13. Other Animals   |  |   |   |   |  |
|   |  |   |   |   |  |
|   |  |   |   |   |  |
|   |  |   |   |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Michael Fare*

VP, Operations

11/1/03



Customer ID and Site Address:

ID: 20877

23 Business Park Dr  
Branford, CT 06405  
County: New Haven

Telephone - 203-315-4000

NOV 26 2003

See attached form for additional information.

Interagency Report Control No. *101*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 16-R-0044  
CUSTOMER NUMBER: 20922

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
(TYPE OR PRINT)

Bayer Pharmaceutical Corporation  
Manager Veterinary Resources  
400 Morgan Ln  
West Haven, CT 06516

Telephone: (203) -812-5046

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. (An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br>(COLUMNS<br>C + D + E) |
|---|--|---|--|---|--|
| 4. Dogs   | 7  | 29  | —  | —   | 36   |
| 5. Cats   | N/A  |   |  |   |  |
| 6. Guinea Pigs  | N/A  |   |  |   |  |
| 7. Hamsters   | N/A  |   |  |   |  |
| 8. Rabbits  | 0  | 103   | —  | —   | 103  |
| 9. Non-human Primates   | N/A  |   |  |   |  |
| 10. Sheep   | N/A  |   |  |   |  |
| 11. Pigs  | N/A  |   |  |   |  |
| 12. Other Farm Animals  | N/A  |   |  |   |  |
| 13. Other Animals   | N/A  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

*Joseph Catino*

Joseph Catino, Senior Vice President

11-25-03

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0008  
CUSTOMER NUMBER: 287

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
( TYPE OR PRINT )

New York Blood Center, Inc.  
310 East 67th Street  
New York New York, NY 10021

Telephone: (212) -570-3010

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )**

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not ye<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquillizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|---|---|---|--|
| 4. Dogs   | 0   | 0   | 0   | 0   | 0  |
| 5. Cats   | 0   | 0   | 0   | 0   | 0  |
| 6. Guinea Pigs  | 0   | 0   | 0   | 0   | 0  |
| 7. Hamsters   | 0   | 0   | 0   | 0   | 0  |
| 8. Rabbits  | 0   | 0   | 0   | 0   | 0  |
| 9. Non-human Primates   | 0   | 0   | 0   | 0   | 0  |
| 10. Sheep   | 0   | 0   | 0   | 0   | 0  |
| 11. Pigs  | 0   | 0   | 0   | 0   | 0  |
| 12. Other Farm Animals  | 0   | 0   | 0   | 0   | 0  |
|   |   |   |   |   |  |
| 13. Other Animals   | 0   | 0   | 0   | 0   | 0  |
|   |   |   |   |   |  |
|   |   |   |   |   |  |
|   |   |   |   |   |  |

**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Robert L. Jones*

Robert L. Jones, MD, President

10/10/03

DEC 02 2003

RSM

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0012  
CUSTOMER NUMBER: 288

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

St. John'S University  
8000 Utopia Parkway  
Jamaica, NY 11439

Telephone: (718) -990-6087

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   | 9  |   | 9  |
| 7. Hamsters   |  |   | 30   |   | 30   |
| 8. Rabbits  | 12   | 5   | 2  |   | 7  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Julia A. Upton, RSM*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Dr. Julia A. Upton, RSM

DATE SIGNED

11/25/03

**Customer ID and Site Address:**

**ID: 288**

**Telephone**

**St. Alberts Hall  
800 Utopia Highway  
Jamaica, NY 11439  
County: Queens**

NOV 18 2003

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0013  
CUSTOMER NUMBER: 282

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

State University Of New York  
College Of Technology / Canton  
860701 College Of Technology  
Canton, NY 13617

Telephone: (315) -386-7074 7187

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   | 60   |   | 60   |
| 5. Cats   |  |   | 70   |   | 70   |
| 6. Guinea Pigs  |  | 1   |  |   | 1  |
| 7. Hamsters   |  | 0   |  |   | 0  |
| 8. Rabbits  |  | 2   |  |   | 2  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Gerbils   |  | 4   |  |   | 4  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Dr. Joseph L. Kennedy, President

11/3/03

Customer ID and Site Address:

ID: 282

Vet Science Tech.

Cook Hall

Canton, NY 13617

County: St Lawrence

Telephone 315 386 7187  
Program Director

We have relocated to the  
Newell Veterinary Technology Building  
State University of New York at Canton  
Canton, NY 13617  
County: St. Lawrence

OCT 21 2003

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0017  
CUSTOMER NUMBER: 291

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Masonic Medical Research Laboratory  
2150 Bleecker Street  
Utica, NY 13501

Telephone: (315) -735-2217

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 4  | 249   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  | 10   | 2   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Dr. Charles Antzelevitch, Executive Dir

10/14/03



UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0018  
CUSTOMER NUMBER: 292

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Regeneron Pharmaceuticals, Inc.  
777 Old Saw Mill River Road  
Tarrytown, NY 10591

Telephone: (914) -347-7000

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   | <i>No covered species used- mice and rats only.</i>  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rest teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Joseph M. Sorrentino*

*Joseph M. Sorrentino, Vice President*

*9/24/03*

Customer ID and Site Address:

ID: 292

Building #2

Telephone

777 Old Saw Mill River

(914)345-7380

Rd.

Tarrytown, NY 10591

County: Westchester

*Building #4*  
*mailing address as above*  
*Location:*  
*765 Old Saw Mill River Rd*  
*Tarrytown, NY 1059*  
*Westchester County*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0024  
CUSTOMER NUMBER: 295

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

State University Of New York  
College Of Envir. Science  
And Forestry  
1 Forestry Drive  
Syracuse, NY 13210

OCT 17 2003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not ye<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|---|--|---|--|
| 4. Dogs   | Ø   |   |  |   | Ø  |
| 5. Cats   | Ø   |   |  |   | Ø  |
| 6. Guinea Pigs  | Ø   |   |  |   | Ø  |
| 7. Hamsters   | Ø   |   |  |   | Ø  |
| 8. Rabbits  |   | 2   |  |   | 2  |
| 9. Non-human Primates   | Ø   |   |  |   | Ø  |
| 10. Sheep   | Ø   |   |  |   | Ø  |
| 11. Pigs  | Ø   |   |  |   | Ø  |
| 12. Other Farm Animals  | Ø   |   |  |   | Ø  |
| 13. Other Animals   | Ø   |   |  |   | Ø  |
|   |   |   |  |   |  |
|   |   |   |  |   |  |
|   |   |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Cornelius B. Murphy Jr.*

CORNELIUS B. MURPHY JR, PRESIDENT

10/10/03

NOV 24 2003

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0027  
CUSTOMER NUMBER: 290

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

State University Of New York  
University At Binghamton  
Vestal Parkway East  
P.O. Box 6000  
Binghamton, NY 13902

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 0   | 0  | 0   | 0  |
| 5. Cats   | 0  | 0   | 0  | 0   | 0  |
| 6. Guinea Pigs  | 0  | 0   | 0  | 0   | 0  |
| 7. Hamsters   | 0  | 0   | 0  | 0   | 0  |
| 8. Rabbits  | 0  | 24  | 0  | 0   | 24   |
| 9. Non-human Primates   | 0  | 0   | 0  | 0   | 0  |
| 10. Sheep   | 0  | 0   | 0  | 0   | 0  |
| 11. Pigs  | 0  | 0   | 0  | 0   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0  | 0   | 0  |
| 13. Other Animals   | 0  | 0   | 0  | 0   | 0  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Stephen A. Gilje  
Associate Vice President for Research

DATE SIGNED  
14 Nov  
2003

Customer ID and Site Address:

ID: 290

Science Building Iii, III  
Vestal Parkway East  
Binghamton, NY 13902 6000  
County: Broome

Telephone (607) 777-4905

DEC 22 2003

This report is required by law (7 USC 2143). Failure to report according to the regulations can

See attached form for additional information

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0028  
CUSTOMER NUMBER: 299

FORM APPROVED  
OMB NO. 0579-0036

# ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

N Y City Health & Hospitals Corporation  
Lincoln Medical/Mental Health  
234 East 149th St  
New York -Bronx, NY 10451

Telephone: (718) -579-5900

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

## REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred,<br>conditioned, or<br>held for use in<br>teaching,<br>testing,<br>experiments,<br>research, or<br>surgery but not yet | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no<br>pain, distress, or<br>use of pain-<br>relieving drugs. | D. Number of animals<br>upon which<br>experiments, teaching,<br>research, surgery, or<br>tests were conducted<br>involving<br>accompanying pain or<br>distress to the animals<br>and for which<br>appropriate anesthetic, a | E. Number of animals upon which teaching,<br>experiments, research, surgery or tests were<br>conducted involving accompanying pain or distress<br>to the animals and for which the use of appropriate<br>anesthetic, analgesic, or tranquilizing drugs would<br>have adversely affected the procedures, results, or<br>interpretation of the teaching, research, experiments,<br>surgery, or tests. (An explanation of the procedures<br>producing pain or distress in these animals and the<br>reasons such drugs were not used must be attached to | F.<br>TOTAL NUMBER<br>OF ANIMALS<br>(COLUMNS<br>C + D + E) |
|---|--|--|---|--|--|
| 4. Dogs   |  |  | 0   |  | 0  |
| 5. Cats   |  |  |   |  |  |
| 6. Guinea Pigs  |  |  |   |  |  |
| 7. Hamsters   |  |  |   |  |  |
| 8. Rabbits  |  |  |   |  |  |
| 9. Non-human Primate  |  |  |   |  |  |
| 10. Sheep   |  |  |   |  |  |
| 11. Pigs  |  |  |   |  |  |
| 12. Other Farm Animals  |  |  |   |  |  |
| 13. Other Animals   |  |  |   |  |  |

### ASSURANCE STATEMENTS

- Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- Each principal investigator has considered alternatives to painful procedures.
- This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

*Yana W. Brunson, MD*  
APHIS FORM 7023  
(AUG 91)

*Yana W. Brunson, MD*  
Training Director  
Acting Chair  
Dept of Su

1-7/3

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

24 5144 H050

ST:11 000

OCT 14 2003

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0030  
CUSTOMER NUMBER: 302

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Union College  
Biology Department  
Schenectady, NY 12308

Telephone: (518) -388-6102

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   | 0  | 0   |  |   | 0  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Christina E. Sorum

VPAAZ

Dean of the Faculty

10/6/03

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0036  
CUSTOMER NUMBER: 307

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
(TYPE OR PRINT)

Rockefeller University  
1230 York Avenue  
New York New York, NY 10021

Telephone: (212) -327-8535

NOV 06 2003

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. (An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>(COLUMNS<br>C + D + E) |
|---|--|---|--|---|--|
| 4. Dogs   | —  | —   | —  | —   | 0  |
| 5. Cats   | 0  | —   | 1  | —   | 1  |
| 6. Guinea Pigs  | 8  | 12  | 91   | —   | 103  |
| 7. Hamsters   | —  | —   | —  | —   | 0  |
| 8. Rabbits  | 2  | —   | 7  | —   | 7  |
| 9. Non-human Primates   | 2  | —   | 33   | —   | 33   |
| 10. Sheep   | —  | —   | —  | —   | 0  |
| 11. Pigs  | —  | —   | —  | —   | 0  |
| 12. Other Farm Animals  | —  | —   | —  | —   | 0  |
| 13. Other Animals   |  |   |  |   |  |
| Gerbils   | 5  | 27  | —  | —   | 27   |

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Frederick M. Bohen*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

FREDERICK M. BOHEN, EXECUTIVE VICE PRES.

DATE SIGNED

11/04/03



Customer ID and Site Address:

ID: 307

Telephone

845 - 677 - 3059

Field Research Ctr

Tyrell Rd

Millbrook, NY 12545

County: Dutchess

DEC 02 2003

See attached form for additional information.

Interagency Report Control No.:

25m

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0041  
CUSTOMER NUMBER: 313

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

State University Of New York  
College At Brockport  
School Of Letters & Sciences  
350 New Campus Dr  
Brockport, NY 14420

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Rats<br>(Biology and<br>Psychology<br>combined)               | 244  | 150   | 20   | 0   | 170  |

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Stuart Appelle*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Stuart Appelle, Ph.D.  
Dean, School of Letters and Sciences

DATE SIGNED

11/25/03

*original*

Customer ID and Site Address:

All redactions on this page are pursuant to (b)(6) & (b)(7)(c).

ID: 313

Holmes Hall

Suny Brockport

Brockport, NY 14420 2984

County: Monroe

Telephone:

Facility: State University of New York College at Brockport  
School of Letters and Sciences  
350 New Campus Drive  
Brockport, NY 14420  
(585) 395-2394

OCT 03 2003

See attached form for additional information.

Interagency Report Control No. *for*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

1. CERTIFICATE NUMBER: 21-R-0043  
CUSTOMER NUMBER: 315

FORM APPROVED  
OMB NO. 0579-0036

State University Of New York  
College Of Plattsburgh  
101 Broad St 812 Kehoe Building  
Plattsburgh, NY 12901

Telephone: (518) -564-2195

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Chinchilla  | 0  | 0   | 80   |   | 80   |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )  
Susan R. Spissinger, Assoc Vice President  
for Academic Affairs and Research

DATE SIGNED

10/2/03

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0046  
CUSTOMER NUMBER: 304

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Canisius College  
2001 Main Street  
Buffalo, NY 14208

Telephone: (716) -888-2550

DEC 16 2003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Lab mice  |  | 42  |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual res teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Vincent M. Cooke, SJ, President

12/9/03

DEC 01 2003

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21:

See attached form for additional information.

Interagency Report Control No.: *RSM*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0051  
CUSTOMER NUMBER: 389

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

State University Of New York  
School Of Medicine At Buffalo  
Level 3, Aml Fac 116 Bio Md B1  
3435 Main Street  
Buffalo, NY 14214

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | ----   | ----  | 111  | ----  | 111  |
| 5. Cats   | ----   | ----  | ----   | ----  | 0  |
| 6. Guinea Pigs  | ----   | 2   | 56   | ----  | 58   |
| 7. Hamsters   | ----   | 22  | 722  | ----  | 744  |
| 8. Rabbits  | 3  | 5   | 215  | ----  | 220  |
| 9. Non-human Primates   | ----   | ----  | 1  | ----  | 1  |
| 10. Sheep   | ----   | ----  | 111  | ----  | 111  |
| 11. Pigs  | ----   | ----  | 399  | ----  | 399  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Ferret  | ----   | ----  | 7  | ----  | 7  |
| Chinchilla  | ----   | ----  | 545  | ----  | 545  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Jaylan Turkkan, PhD  
Vice President for Research

11/25/03

Customer ID and Site Address:

ID: 389

Telephone (716) 829-2919

Biomedical Education  
Building  
3435 Main St. Room  
116/213  
Buffalo, NY 14212  
County: Erie

Customer ID and Site Address:

ID: 389

Suny At Buffalo North  
Campus  
Hochstetter Hall  
Buffalo, NY 14260  
County: Erie

Telephone (716) 829-2919



Customer ID and Site Address:

ID: 389

Parker Hall  
3435 Main Street  
Buffalo, NY 14214  
County: Erie

Telephone: 716-829-2919

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0053  
CUSTOMER NUMBER: 390

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Dr Candace S. Vancko  
Sunny College Of Technology  
College Of Technology  
2 Main St  
Delhi, NY 13753

Telephone: (607) -746-4425

OCT 06 2003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

Farnsworth Hall

FACILITY LOCATIONS ( Sites ) : See Attached Listing

Ladd Veterinary Sci. Tech. Complex ( College Farm )

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred,<br>conditioned, or<br>held for use in<br>teaching,<br>testing,<br>experiments,<br>research, or<br>surgery but not yet | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no<br>pain, distress, or<br>use of pain-<br>relieving drugs. | D. Number of animals<br>upon which<br>experiments, teaching,<br>research, surgery, or<br>tests were conducted<br>involving<br>accompanying pain or<br>distress to the animals<br>and for which<br>appropriate anesthetic, a | E. Number of animals upon which teaching,<br>experiments, research, surgery or tests were<br>conducted involving accompanying pain or distress<br>to the animals and for which the use of appropriate<br>anesthetic, analgesic, or tranquilizing drugs would<br>have adversely affected the procedures, results, or<br>interpretation of the teaching, research, experiments,<br>surgery, or tests. ( An explanation of the procedures<br>producing pain or distress in these animals and the<br>reasons such drugs were not used must be attached to | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|--|---|---|--|
| 4. Dogs   | 0  | 0  | 115   | 0   | 115  |
| 5. Cats   | 0  | 0  | 61  | 0   | 61   |
| 6. Guinea Pigs  | 0  | 0  | 44  | 0   | 44   |
| 7. Hamsters   | 0  | 0  | 80  | 0   | 80   |
| 8. Rabbits  | 0  | 0  | 35  | 0   | 35   |
| 9. Non-human Primate  | 0  | 0  | 8   | 0   | 8  |
| 10. Sheep   | 0  | 0  | 29  | 0   | 29   |
| 11. Pigs  | 0  | 0  | 27  | 0   | 27   |
| 12. Other Farm Animals  | 0  | 0  | 32  | 0   | 32   |
| Bovine  | 0  | 0  | 6   | 0   | 6  |
| Equine  | 0  | 0  | 8   | 0   | 8  |
| 13. Other Animals   | 0  | 0  | 112   | 0   | 112  |
| Goats   | 0  | 0  | 22  | 0   | 22   |
| Gerbils   | 0  | 0  |   |   |  |
| Chickens  | 0  | 0  |   |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

Candace S. Vancko

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print

Dr. Candace Vancko, College President

DATE SIGNED

9-30-03

DEC 02 2003

250M

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0058

CUSTOMER NUMBER: 319

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Long Island University  
Life Science Bldg. Rm13  
720 Northern Blvd.  
Brookville, NY 11548

Telephone: (516) -299-2501

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 0   | 0  | 0   | 0  |
| 5. Cats   | 0  | 0   | 0  | 0   | 0  |
| 6. Guinea Pigs  | 0  | 0   | 0  | 0   | 0  |
| 7. Hamsters   | 0  | 0   | 0  | 0   | 0  |
| 8. Rabbits  | 0  | 15  | 0  | 0   | 15   |
| 9. Non-human Primates   | 0  | 0   | 0  | 0   | 0  |
| 10. Sheep   | 0  | 0   | 0  | 0   | 0  |
| 11. Pigs  | 0  | 0   | 0  | 0   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0  | 0   | 0  |
| 13. Other Animals   |  |   |  |   |  |
| Rats  | 110  | 168   | 0  | 0   | 168  |
| Mice  | 380  | 585   | 0  | 0   | 585  |
| Birds   | 15   | 0   | 0  | 0   | 0  |
| Reptiles  | 25   | 0   | 0  | 0   | 0  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

Kathryn S. Rockett

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Kathryn S. Rockett  
Assistant Vice President for Sponsored  
Research

DATE SIGNED

11/65/03

**Customer ID and Site Address:**

**ID: 319**

**Life Sciences Building  
Northern Blvd.  
Brookville, NY 11548  
County: Nassau**

**Telephone**

Customer ID and Site Address:

ID:319

Pharmacy And Health  
Science Building  
70 Dekalb Ave  
Brooklyn, NY 11201  
County: Kings

Telephone

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0059  
CUSTOMER NUMBER: 310

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Brookdale University Hospital & Medical Center  
One Brookdale Plaza  
Animal Facility  
Brooklyn, NY 11212

Telephone: (718) -240-5522

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquil<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   | 0  |
| 5. Cats   |  |   |  |   | 0  |
| 6. Guinea Pigs  |  |   |  |   | 0  |
| 7. Hamsters   |  |   |  |   | 0  |
| 8. Rabbits  |  |   |  |   | 0  |
| 9. Non-human Primates   |  |   |  |   | 0  |
| 10. Sheep   |  |   |  |   | 0  |
| 11. Pigs  |  |   |  |   | 0  |
| 12. Other Farm Animals  |  |   |  |   | 0  |
|   |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   | 0  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Vito Buccelato*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Vito Buccelato, Vice President  
Clinical Services

DATE SIGNED

11.14.03

OCT 31 2003

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0060  
CUSTOMER NUMBER: 311

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

New York Medical College  
Dept Of Comparative Medicine  
Basic Science Building  
Valhalla, NY 10595

Telephone: (914) -594-4217

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   | 186  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   | 12   |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   | 95   |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   | 12   |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Chinchillas   |  |   | 5  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Ralph A. O'Connell MD  
Provost and Dean, School of Medicine

10/30/03

NOV 13 2003

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0071

CUSTOMER NUMBER: 324

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

St. Luke'S - Roosevelt  
Institute For Health Sciences  
1111 Amsterdam Avenue  
Animal Care Facility  
Clark 10  
New York New York, NY 10025

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | Ø  | Ø   | 44   | Ø   | 44   |
| 5. Cats   | Ø  | Ø   | Ø  | Ø   | Ø  |
| 6. Guinea Pigs  | Ø  | Ø   | 154  | Ø   | 154  |
| 7. Hamsters   | Ø  | Ø   | Ø  | Ø   | Ø  |
| 8. Rabbits  | Ø  | Ø   | 18   | Ø   | 18   |
| 9. Non-human Primates   | Ø  | Ø   | Ø  | Ø   | Ø  |
| 10. Sheep   | Ø  | Ø   | Ø  | Ø   | Ø  |
| 11. Pigs  | Ø  | Ø   | 19   | Ø   | 19   |
| 12. Other Farm Animals  | Ø  | Ø   | Ø  | Ø   | Ø  |
| 13. Other Animals   | Ø  | Ø   | Ø  | Ø   | Ø  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Arthur Eisenberg*

ARTHUR EISENBERG, Ph.D. ADMINISTRATOR

11/11/03



DEC 02 2003

See attached form for additional information.

Interagency Report Control No.:

25M

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0072  
CUSTOMER NUMBER: 326

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Memorial Sloan-Kettering Cancer Center  
1275 York Ave  
New York New York, NY 10021

Telephone: (212) -639-7533

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   | 150  |   | 150  |
| 8. Rabbits  |  | 16  | 1  |   | 17   |
| 9. Non-human Primates   |  |   | 5  |   | 5  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Bats  |  | 107   |  |   | 107  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Mr. James Quirk

DATE SIGNED

11/20/03

**APHIS form 7023 Site List**

Registration #: 21-R-0072

Customer Number: 326

Facility: Memorial Sloan Kettering Cancer Center

1275 York Avenue

New York, NY 10021

(212) 639-8901

**Kettering Lab**

425 East 68<sup>th</sup> Street

New York, NY 10021

County: New York

(212) 639-8901

**Weill Medical College of Cornell University**

1300 York Avenue

New York, NY 10021

County: New York

(212) 746-1031

*Deutz*

|  |  |   |
|--|--|---|
| <b>UNITED STATES DEPARTMENT OF AGRICULTURE<br/>ANIMAL AND PLANT HEALTH INSPECTION SERVICE</b>  | <b>1. CERTIFICATE NUMBER:</b> 21-R-0074<br><br><b>CUSTOMER NUMBER:</b> 527 | <b>FORM APPROVED</b><br>OMB NO. 0579-0036 |
| <b>ANNUAL REPORT OF RESEARCH FACILITY</b><br>( TYPE OR PRINT )   |  |   |
| Nassau University Medical Center<br>Biomedical Research Facility<br>2201 Hempstead Turnpike<br>East Meadow, NY 11554<br><br>Telephone: (516) -572-6201 |  |   |

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

**FACILITY LOCATIONS ( Sites ) - See Attached Listing**

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )**

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not ye<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use o<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals ar<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for w/ the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|--|--|--|--|
| 4. Dogs   | —   | —  | —  | —  | —  |
| 5. Cats   | —   | —  | —  | —  | —  |
| 6. Guinea Pigs  | —   | —  | —  | —  | —  |
| 7. Hamsters   | —   | —  | —  | —  | —  |
| 8. Rabbits  | 3   | —  | 3  | —  | 3  |
| 9. Non-human Primates   | —   | —  | —  | —  | —  |
| 10. Sheep   | —   | —  | —  | —  | —  |
| 11. Pigs  | —   | —  | —  | —  | —  |
| 12. Other Farm Animals  | —   | —  | —  | —  | —  |
| 13. Other Animals   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |

**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual res-  
teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap  
Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc  
brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**  
( Chief Executive Officer or Legally Responsible Institutional Official )

|   |   |                         |
|---|---|-------------------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL<br> | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )<br>Chief Executive Officer | DATE SIGNED<br>12/29/03 |
|---|---|-------------------------|

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

1. CERTIFICATE NUMBER: 21-R-0075  
CUSTOMER NUMBER: 434

FORM APPROVED  
OMB NO. 0579-0036

N Y State Psychiatric Institute  
1051 Riverside Drive  
New York New York, NY 10032

Telephone: (212) -543-5000

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not ye<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquilz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|---|--|--|--|
| 4. Dogs   |   |   |  |  |  |
| 5. Cats   | 4   |   | 30   |  | 30   |
| 6. Guinea Pigs  |   |   |  |  |  |
| 7. Hamsters   |   |   |  |  |  |
| 8. Rabbits  |   |   |  |  |  |
| 9. Non-human Primates   | 2   | 56  | 17   |  | 73   |
| 10. Sheep   |   |   |  |  |  |
| 11. Pigs  |   |   |  |  |  |
| 12. Other Farm Animals  |   |   |  |  |  |
| 13. Other Animals   |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Dr. Francine Cournos, Director, NYSPI

11/18/2007

NOV 13 2003

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0078  
CUSTOMER NUMBER: 435

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
(TYPE OR PRINT)

City College/Medical School Of Cuny, The  
Convent Avenue & 138th St  
Shepard #16  
New York New York, NY 10031

Telephone: (212) -650-5418

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. (An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>(COLUMNS<br>C + D + E) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  | 3  |   | 22   |   | 22   |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Ferret  | 0  | 0   | 34   | 0   | 34   |
| Naked Mole-Rats   | 472  |   | 60   |   | 60   |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

*John R. Bats*

Joseph BARBA, Ph.D., Associate Provost

APHIS FORM 7023  
(AUG 91)

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

The City College of the City University of N.Y.

|   |   |   |
|---|---|---|
| <p><b>UNITED STATES DEPARTMENT OF AGRICULTURE</b><br/> <b>ANIMAL AND PLANT HEALTH INSPECTION SERVICE</b></p><br><br><p><b>ANNUAL REPORT OF RESEARCH FACILITY</b><br/>         (TYPE OR PRINT)</p> | <p>1. CERTIFICATE NUMBER: 21-R-0081<br/>         CUSTOMER NUMBER: 333</p><br><p>Montefiore Medical Center<br/>         Research &amp; Sponsored Programs<br/>         111 East 210th Street<br/>         Bronx, NY 10467</p><br><p>Telephone: (718) -920-4151</p> | <p>FORM APPROVED<br/>         OMB NO. 0579-0036</p> |
|---|---|---|

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS ( Sites ) - See Attached Listing MMC - Central 5

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )**

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 5  | 0   | 26   | 0   | 26   |
| 5. Cats   | 0  | 0   | 0  | 0   | 0  |
| 6. Guinea Pigs  | 0  | 0   | 0  | 0   | 0  |
| 7. Hamsters   | 0  | 0   | 0  | 0   | 0  |
| 8. Rabbits  | 7  | 0   | 29   | 0   | 29   |
| 9. Non-human Primates   | 0  | 0   | 0  | 0   | 0  |
| 10. Sheep   | 0  | 0   | 0  | 0   | 0  |
| 11. Pigs  | 0  | 0   | 263  | 0   | 263  |
| 12. Other Farm Animals  | 0  | 0   | 0  | 0   | 0  |
|   |  |   |  |   |  |
| 13. Other Animals   | 0  | 0   | 0  | 0   | 0  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rest teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
 ( Chief Executive Officer or Legally Responsible Institutional Official )

|  |   |  |
|--|---|--|
| <p>SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL</p> | <p>NAME &amp; TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )</p> <p><b>V.B. Hatcher, Ph.D</b><br/> <b>Research Director MMC/ORPS</b></p> | <p>DATE SIGNED</p> <p><b>10/2/03</b></p> |
|--|---|--|

NOV 25 2003

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21:

See attached form for additional information.

Interagency Report Control No. *gpm*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0084  
CUSTOMER NUMBER: 448

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Nathan S. Kline Institute For Psych. Res  
140 Old Orangeburg Rd  
Orangeburg, NY 10962

Telephone: (845) -395-5500

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of animal<br>being bred,<br>conditioned, or<br>held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals ar<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquillizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for w/ the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures, res<br>or interpretation of the teaching, research, experiments,<br>surgery, or tests. ( An explanation of the procedures<br>producing pain or distress in these animals and the reas<br>such drugs were not used must be attached to this repor | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|---|---|--|--|
| 4. Dogs   |   |   |   |  |  |
| 5. Cats   |   |   |   |  |  |
| 6. Guinea Pigs  |   |   |   |  |  |
| 7. Hamsters   |   |   |   |  |  |
| 8. Rabbits  | 0   | 0   | 11  | 0  | 11   |
| 9. Non-human Primates   | 7   | 29  | 10  | 0  | 39   |
| 10. Sheep   |   |   |   |  |  |
| 11. Pigs  |   |   |   |  |  |
| 12. Other Farm Animals  |   |   |   |  |  |
|   |   |   |   |  |  |
| 13. Other Animals   |   |   |   |  |  |
|   |   |   |   |  |  |
|   |   |   |   |  |  |
|   |   |   |   |  |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual res teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Thomas O. O'Hara*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

THOMAS O O'HARA  
DEPUTY DIRECTOR INSTITUTE ADMINISTRATION 11/24/03

DATE SIGNED

NOV 20 2003

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21:

See attached form for additional information.

Interagency Report Control No. *for*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0087

FORM APPROVED  
OMB NO. 0579-0036

CUSTOMER NUMBER: 323

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Eastman Kodak Company  
1100 Ridgeway Ave. Bldg. 320  
Rochester, NY 14652

Telephone: (585) -722-5036

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals and<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|---|---|--|
| 4. Dogs   | 0  | 0   | 0   | 0   | 0  |
| 5. Cats   | 0  | 0   | 0   | 0   | 0  |
| 6. Guinea Pigs  | 0  | 694   | 4   | 0   | 698  |
| 7. Hamsters   | 0  | 0   | 0   | 0   | 0  |
| 8. Rabbits  | 0  | 52  | 8   | 0   | 60   |
| 9. Non-human Primates   | 0  | 0   | 0   | 0   | 0  |
| 10. Sheep   | 0  | 0   | 0   | 0   | 0  |
| 11. Pigs  | 0  | 0   | 0   | 0   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0   | 0   | 0  |
| 13. Other Animals   | 0  | 0   | 0   | 0   | 0  |
|   |  |   |   |   |  |
|   |  |   |   |   |  |
|   |  |   |   |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*R. Hays Bell*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Dr. R. Hays Bell, Ph.D.,  
Vice President, Eastman Kodak Company  
Director, Health, Safety, and Environment

DATE SIGNED

11/17/03



DEC 01 2003

See attached form for additional information.

Interagency Report Control No.: RSM

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0089  
CUSTOMER NUMBER: 458

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Laguardia Community College  
31-10 Thomson Avenue  
Long Island City, NY 11101

Telephone: (718) -482-5764

2003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 9  | 0   | 9  | 0   | 9  |
| 5. Cats   | 8  | 0   | 8  | 0   | 8  |
| 6. Guinea Pigs  | 0  | 0   | 0  | 0   | 0  |
| 7. Hamsters   | 0  | 0   | 0  | 0   | 0  |
| 8. Rabbits  | 9  | 0   | 9  | 0   | 9  |
| 9. Non-human Primates   | 0  | 0   | 0  | 0   | 0  |
| 10. Sheep   | 0  | 0   | 0  | 0   | 0  |
| 11. Pigs  | 0  | 0   | 0  | 0   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0  | 0   | 0  |
| 13. Other Animals   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

X 

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Gail O. Mellow, President

DATE SIGNED

11/24/03

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0090  
CUSTOMER NUMBER: 459

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Brooklyn College Of Cuny  
2900 Bedford Avenue  
Brooklyn, NY 11210

Telephone: (718) -780-5606

OCT 28 2003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   | 0  |
| 5. Cats   |  |   |  |   | 0  |
| 6. Guinea Pigs  |  |   |  |   | 0  |
| 7. Hamsters   |  |   |  |   | 0  |
| 8. Rabbits  |  |   |  |   | 0  |
| 9. Non-human Primates   |  |   |  |   | 0  |
| 10. Sheep   |  |   |  |   | 0  |
| 11. Pigs  |  |   |  |   | 0  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Christoph M. Kimmich*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

CHRISTOPH M. KIMMICH, President

DATE SIGNED

*10/20/03*

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

See reverse side for additional information.

Interagency Report Control No  
0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.  
21-R-0093

CUSTOMER NO.  
464

FORM APPROVED  
OMB NO. 0579-0038

# ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA. Include Zip Code)

HUNTER COLLEGE  
695 PARK AVENUE  
ROOM 1525 NORTH BUILDING  
NEW YORK NEW YORK, NY 10021

JAN 02 2004

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

## FACILITY LOCATIONS (if any)

See Attached Listing

695 Park Avenue, 1525 North Bldg  
New York, NY 10021

## REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report) | F. TOTAL NO. OF ANIMALS (Cols. C + D + E) |
|--|---|---|---|--|---|
| 4. Dogs  | 0   | 0   | 0   | 0  | 0   |
| 5. Cats  | 0   | 0   | 0   | 0  | 0   |
| 6. Guinea Pigs                                       | 0   | 0   | 0   | 0  | 0   |
| 7. Hamsters  | 0   | 0   | 0   | 0  | 0   |
| 8. Rabbits   | 0   | 0   | 0   | 0  | 0   |
| 9. Non-Human Primates                                | 0   | 0   | 0   | 0  | 0   |
| 10. Sheep  | 0   | 0   | 0   | 0  | 0   |
| 11. Pigs   | 0   | 0   | 0   | 0  | 0   |
| 12. Other Farm Animals                               | 0   | 0   | 0   | 0  | 0   |
| 13. Other Animals                                    | 0   | 0   | 0   | 0  | 0   |
|  |   |   |   |  |   |
|  |   |   |   |  |   |
|  |   |   |   |  |   |

## ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

## CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

SIGNATURE OF S.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

*[Signature]*

Richard Pizer Provost

12/26/03

APHIS FORM 7023  
(AUG 91)

(Replaces VS FORM 18-23 (Oct 88), which is obsolete)

PART 1 - HEADQUARTERS

DEC 02 2003

See attached form for additional information.

Interagency Report Control No.: RSM

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0094  
CUSTOMER NUMBER: 478

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Northeastern Wildlife Inc  
1251 Center Road, P.O Box 1000  
South Plymouth, NY 13844

Telephone: (607) -334-5809

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Woodchuck   | 7  | 43  |  |   | 43   |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

APHIS FORM 7023  
( AUG 91 )

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

James Whipple, President

11/26/03

NOV 18 2003

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0095  
CUSTOMER NUMBER: 503

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Lake Immunogenics, Inc.  
348 Berg Road  
Ontario, NY 14519

Telephone: (585) -265-1973

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| Goats   | 50   | 7   | 0  | 0   | 7  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Barbara L. Bowman CEO*

Barbara Bowman CEO

11-11-03

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0097  
CUSTOMER NUMBER: 593

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Institute Of Ecosystem Studies, Inc.  
Box Ab (65 Sharon Turnpike)  
Millbrook, NY 12545

Telephone: (845) -677-5343

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not ye<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|---|--|---|--|
| 4. Dogs   |   |   |  |   |  |
| 5. Cats   |   |   |  |   |  |
| 6. Guinea Pigs  |   |   |  |   |  |
| 7. Hamsters   |   |   |  |   |  |
| 8. Rabbits  |   |   |  |   |  |
| 9. Non-human Primates   |   |   |  |   |  |
| 10. Sheep   |   |   |  |   |  |
| 11. Pigs  |   |   |  |   |  |
| 12. Other Farm Animals  |   |   |  |   |  |
| 13. Other Animals   |   | 1214  | 145  |   | 1359   |
|   |   |   |  |   |  |
|   |   |   |  |   |  |
|   |   |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Joseph S. Warner, Administrator

DATE SIGNED

6/22/03

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.

21-R-0097

FORM APPROVED  
OMB NO. 0579-0038CONTINUATION SHEET FOR ANNUAL REPORT  
OF RESEARCH FACILITY  
(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

Institute of Ecosystem Studies  
Box AB  
Millbrook, NY 12545  
845-677-5343

## REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use this form.)

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report.) | F. TOTAL NO. OF ANIMALS (Cols. C + D + E) |
|--|---|---|---|---|---|
| 12. & OR 13. Other (List by species)                 |   |   |   |   |   |
| short-tailed shrew                                   |   | 72  | 8   |   | 80  |
| five-lined skink                                     |   | 31  |   |   | 31  |
| prairie vole   |   | 2   |   |   | 2   |
| pine vole  |   | 2   |   |   | 2   |
| short-tailed weasel                                  |   | 2   |   |   | 2   |
| long-tailed weasel                                   |   | 2   |   |   | 2   |
| mink   |   | 1   |   |   | 1   |
| white-footed mouse                                   |   | 940   | 67  |   | 1007                                      |
| fence lizard   |   | 12  |   |   | 12  |
| gray squirrel  |   | 1   | 23  |   | 24  |
| masked shrew   |   | 9   |   |   | 9   |
| eastern chipmunk                                     |   | 140   | 47  |   | 187                                       |
|  |   |   |   |   |   |
|  |   |   |   |   |   |
|  |   |   |   |   |   |
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## ASSURANCE STATEMENTS

- 1). Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME &amp; TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

Joseph S. Warner, Administrator

10/22/03

Customer ID and Site Address:

ID: 593

Rearing Facility  
1481 Route 82  
Millbrook, NY 12545  
County: Dutchess

Telephone  
(845)677-7677



UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0102  
CUSTOMER NUMBER: 720

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
( TYPE OR PRINT )

Marmotech, Inc.  
181 Midline Road  
Slaterville Springs, NY 14881

NOV 07 2003

Telephone: (999) 999-9999

607 539-6176

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )**

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of animal<br>being bred,<br>conditioned, or<br>held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals and<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for which<br>the use of appropriate anesthetic, analgesic, or tranquilizing<br>drugs would have adversely affected the procedures, results<br>or interpretation of the teaching, research, experiments,<br>surgery, or tests. ( An explanation of the procedures<br>producing pain or distress in these animals and the reason<br>such drugs were not used must be attached to this report ) | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|---|---|--|--|
| 4. Dogs   |   |   |   |  |  |
| 5. Cats   |   |   |   |  |  |
| 6. Guinea Pigs  |   |   |   |  |  |
| 7. Hamsters   |   |   |   |  |  |
| 8. Rabbits  |   |   |   |  |  |
| 9. Non-human Primates   |   |   |   |  |  |
| 10. Sheep   |   |   |   |  |  |
| 11. Pigs  |   |   |   |  |  |
| 12. Other Farm Animals  |   |   |   |  |  |
| 13. Other Animals   |   |   |   |  |  |
| Woodchucks  | 2804  | 0   | 16  | 0  | 16   |

**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Bud C. Tennant*

Bud C. Tennant, D.V.M., Vice President

300403

DEC 02 2003

See attached form for additional information.

Interagency Report Control No.:

25m

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0103  
CUSTOMER NUMBER: 330

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Albany Medical College  
Animal Resources Facility  
47 New Scotland Avenue  
Albany, NY 12208

Telephone: (518) -445-5389

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 23   | 0   | 7  | 0   | 30   |
| 5. Cats   | 0  | 0   | 0  | 0   | 0  |
| 6. Guinea Pigs  | 12   | 0   | 164  | 0   | 176  |
| 7. Hamsters   | 0  | 0   | 0  | 0   | 0  |
| 8. Rabbits  | 3  | 0   | 10   | 0   | 13   |
| 9. Non-human Primates   | 0  | 0   | 10   | 0   | 10   |
| 10. Sheep   | 0  | 0   | 0  | 0   | 0  |
| 11. Pigs  | 0  | 0   | 44   | 0   | 44   |
| 12. Other Farm Animals  |  |   |  |   |  |
| Goats   | 0  | 0   | 9  | 0   | 9  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rest teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Thomas J. Irwin, M.B.A.  
Dir. of Research Administration

12/1/03

DEC 10 2003

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

See reverse side for additional information.

Interagency Report Control No.  
0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.  
21-R-0105

CUSTOMER NO.  
704

FORM APPROVED  
OMB NO. 0579-0036

# ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

ROGOSIN INSTITUTE, THE  
505 EAST 70TH STREET  
NEW YORK NEW YORK, NY 10021  
(212) 746-1552

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

## FACILITY LOCATIONS(sites)

See Attached Listing

## REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred,<br>conditioned, or<br>held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not<br>yet used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no<br>pain, distress, or<br>use of pain-<br>relieving drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted in volving<br>accompanying pain or<br>distress to the animals<br>and for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching,<br>experiments, research, surgery or tests were<br>conducted involving accompanying pain or distress<br>to the animals and for which the use of appropriate<br>anesthetic, analgesic, or tranquilizing drugs would<br>have adversely affected the procedures, results, or<br>interpretation of the teaching, research,<br>experiments, surgery, or tests. (An explanation of<br>the procedures producing pain or distress in these<br>animals and the reasons such drugs were not used<br>must be attached to this report) | F.<br>TOTAL NO.<br>OF ANIMALS<br><br>(Cols. C +<br>D + E) |
|---|---|--|--|--|---|
| 4. Dogs   | NONE  | NONE   | 5 (five)   | NONE   | 5   |
| 5. Cats   |   |  |  |  |   |
| 6. Guinea Pigs  |   |  |  | 12/03/03   |   |
| 7. Hamsters   |   |  |  |  |   |
| 8. Rabbits  |   |  |  |  |   |
| 9. Non-Human Primates   |   |  |  |  |   |
| 10. Sheep   |   |  |  |  |   |
| 11. Pigs  |   |  |  |  |   |
| 12. Other Farm Animals  |   |  |  |  |   |
| 13. Other Animals   |   |  |  |  |   |

## ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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## CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer or Legally Responsible Institutional official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

*[Signature]*

Senior Vice-President

12/05/03

APHIS FORM 7023  
(AUG 91)

(Replaces VS FORM 18-23 (Oct 88), which is obsolete)

PART 1 - HEADQUARTERS

APHIS Form 7023 Site List

The following sites have been reported by the facility.

---

Registration Number: 21-R-0105  
Customer Number: 704  
Facility: *BD* 12/3/2003 ROGOSIN INSTITUTE, THE  
505 EAST 70TH STREET  
~~NEW YORK NEW YORK, NY 10021~~  
(212) 746-1552

---

ROGOSIN  
~~ROGOSIN INSTITUTE, THE~~  
740 BIRCH RD.  
XENIA, OH 45385 *BD* 12/3/2003

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0107  
CUSTOMER NUMBER: 342

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

North Shore-Long Island Jewish Health System  
350 Community Drive  
Manhasset, NY 11030

Telephone: (516) -562-1000

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals and<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquillizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for which<br>the use of appropriate anesthetic, analgesic, or tranquilizing<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals and<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   | 8  |   | 8  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  | 14   |   | 223  |   | 223  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   | 2  |   | 2  |
| 11. Pigs  |  |   | 5  |   | 5  |
| 12. Other Farm Animals  |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*VP+COO*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

VP+COO

DATE SIGNED

4/11/03

Continuation page for question 3 Reporting Facility:  
Certificate Number: 21-R-0107

North Shore – Long Island Jewish Research Institute  
350 Community Drive  
Manhasset, New York 11030  
Laboratory Animal Facility

Other locations where animals were housed or used in actual  
research, testing, or experimentation, or held for these purposes are  
as follows:

Long Island Jewish Medical Center  
270-05 76<sup>th</sup> Ave  
New Hyde Park, New York 11040  
Large Animal Facility  
Small Animal Facility

DEC 02 2003

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0109  
CUSTOMER NUMBER: 343

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

University Of Rochester  
School Of Medicine & Dentistry  
601 Elmwood Avenue  
P.O. Box 674  
Rochester, NY 14642

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 16  | 22   | 0   | 38   |
| 5. Cats   | 0  | 0   | 18   | 0   | 18   |
| 6. Guinea Pigs  | 0  | 0   | 0  | 0   | 0  |
| 7. Hamsters   | 0  | 29  | 89   | 0   | 118  |
| 8. Rabbits  | 0  | 130   | 299  | 0   | 429  |
| 9. Non-human Primates   | 0  | 0   | 89   | 0   | 89   |
| 10. Sheep   | 0  | 0   | 0  | 0   | 0  |
| 11. Pigs  | 0  | 0   | 1  | 0   | 1  |
| 12. Other Farm Animals  | 0  | 0   | 0  | 0   | 0  |
| 13. Other Animals   |  |   |  |   |  |
| Bats  | 0  | 0   | 16   | 0   | 16   |
| Ferrets   | 0  | 0   | 33   | 0   | 33   |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inx brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

C. McCollister Evans M.D.

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

C. McCollister (Mac) Evans, MD  
Senior Vice President and Vice Provost

DATE SIGNED

11/25/03

University of Rochester  
Animal Resource - Sites

School of Medicine & Dentistry (including EDC, MRB and MRBX)  
601 Elmwood Avenue  
Rochester, NY 14642

Medical Center Annex  
601 Elmwood Avenue  
Rochester, NY 14642

Brain & Cognitive Sciences  
355 Meliora Hall -River Campus  
Rochester, NY 14620



UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0112  
CUSTOMER NUMBER: 335

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Mary Imogene Bassett Hospital, The  
One Atwell Road  
Cooperstown, NY 13326

Telephone: (607) -547-3045

OCT 03 2003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  | 54   |   |  |   | 54   |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Allan Green*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

Allan Green, PhD, Director Bassett Research

DATE SIGNED

9/29/03

NOV 28 2003

See attached form for additional information.

Interagency Report Control No. *for*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0118  
CUSTOMER NUMBER: 346

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

New York University-Washington Square  
New York Univwashington Sq Campus  
Office Of Laboratory Animal Services  
15 Washington Place, Apt. 1k  
New York New York, NY 10003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not ye<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|---|--|---|--|
| 4. Dogs   |   |   |  |   |  |
| 5. Cats   |   |   |  |   |  |
| 6. Guinea Pigs  |   |   |  |   |  |
| 7. Hamsters   |   |   |  |   |  |
| 8. Rabbits  |   | 3   |  |   | 3  |
| 9. Non-human Primates   | 18  | 3   | 95   |   | 116  |
| 10. Sheep   |   |   |  |   |  |
| 11. Pigs  |   |   |  |   |  |
| 12. Other Farm Animals  |   |   |  |   |  |
| 13. Other Animals   |   |   |  |   |  |
| Gerbils   |   | 53  | 155  |   | 208  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

New York University—Washington Square Facility Locations

**Meyer Facility**

6 Washington Place

Basement

New York, NY 10003

**Silver Center**

100 Washington Square East

11<sup>th</sup> Floor

New York, NY 10003

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0123  
CUSTOMER NUMBER: 395

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

N Y Society For The Relief Of The  
Raptured/Crippled Maintaining  
Hospital For Special Surgery  
535 East 70th Street  
New York New York, NY 10021

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 0   | 0  | 0   | 0  |
| 5. Cats   | 0  | 0   | 0  | 0   | 0  |
| 6. Guinea Pigs  | 0  | 0   | 0  | 0   | 0  |
| 7. Hamsters   | 0  | 0   | 0  | 0   | 0  |
| 8. Rabbits  | 30   | 0   | 10   | 0   | 10   |
| 9. Non-human Primates   | 0  | 0   | 0  | 0   | 0  |
| 10. Sheep   | 0  | 0   | 0  | 0   | 0  |
| 11. Pigs  | 0  | 0   | 0  | 0   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0  | 0   | 0  |
| 13. Other Animals   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Vincent L. Grassia, Jr.*

VINCENT L. GRASSIA, JR. VP in Research 9/30/03

|   |  |  |   |
|---|--|--|---|
| <b>UNITED STATES DEPARTMENT OF AGRICULTURE<br/>ANIMAL AND PLANT HEALTH INSPECTION SERVICE</b><br><br><b>ANNUAL REPORT OF RESEARCH FACILITY</b><br>( TYPE OR PRINT ) | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> <b>1. CERTIFICATE NUMBER:</b> 21-R-0128<br/> <b>CUSTOMER NUMBER:</b> 401         </td> <td style="width: 50%; text-align: center;"> <b>FORM APPROVED</b><br/>           OMB NO. 0579-0036         </td> </tr> </table><br>Syracuse University<br>Office Of Regulatory Compliance<br>621 Skytop Rd<br>Syracuse, NY 13244<br><br>Telephone: (315) -443-3013 | <b>1. CERTIFICATE NUMBER:</b> 21-R-0128<br><b>CUSTOMER NUMBER:</b> 401 | <b>FORM APPROVED</b><br>OMB NO. 0579-0036 |
| <b>1. CERTIFICATE NUMBER:</b> 21-R-0128<br><b>CUSTOMER NUMBER:</b> 401  | <b>FORM APPROVED</b><br>OMB NO. 0579-0036  |  |   |

**3. REPORTING FACILITY** ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

**FACILITY LOCATIONS ( Sites ) - See Attached Listing**

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )**

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not ye<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|---|---|--|---|--|
| 4. Dogs   | 0   | 0   | 0  | 0   | 0  |
| 5. Cats   | 0   | 0   | 2  | 0   | 2  |
| 6. Guinea Pigs  | 0   | 0   | 0  | 0   | 0  |
| 7. Hamsters   | 0   | 0   | 0  | 0   | 0  |
| 8. Rabbits  | 0   | 6   | 0  | 0   | 6  |
| 9. Non-human Primates   | 0   | 0   | 0  | 0   | 0  |
| 10. Sheep   | 0   | 6   | 0  | 0   | 6  |
| 11. Pigs  | 0   | 0   | 0  | 0   | 0  |
| 12. Other Farm Animals  | 0   | 0   | 0  | 0   | 0  |
|   |   |   |  |   |  |
| 13. Other Animals   |   |   |  |   |  |
| Gerbils   | 42  | 0   | 126  | 0   | 126  |
|   |   |   |  |   |  |
|   |   |   |  |   |  |

**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Dr. Ben Ware

V.P. for Research & Computing

RECEIVED NOV 10 2003

Institute for Sensory Research  
621 Skytop Road  
Syracuse University  
Syracuse, New York 13244-5290

Ladd Farm Complex  
State University of New York  
College of Technology  
Delhi, New York 13753

Biology Research Laboratories  
130 College Place  
Syracuse University  
Syracuse New York

NOV 24 2003

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 211.

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0132  
CUSTOMER NUMBER: 394

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Yeshiva University  
Albert Einstein College Of Med  
1300 Morris Park Ave  
Suite 312  
Bronx, NY 10461

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 0   | 0  | 0   | 0  |
| 5. Cats   | 0  | 0   | 0  | 0   | 0  |
| 6. Guinea Pigs  | 0  | 0   | 0  | 0   | 0  |
| 7. Hamsters   | 0  | 20  | 0  | 0   | 20   |
| 8. Rabbits  | 0  | 0   | 27   | 0   | 27   |
| 9. Non-human Primates   | 2  | 0   | 1  | 0   | 1  |
| 10. Sheep   | 0  | 0   | 0  | 0   | 0  |
| 11. Pigs  | 0  | 0   | 0  | 0   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0  | 0   | 0  |
| 13. Other Animals   |  |   |  |   |  |
| Gerbil  | 0  | 2   | 60   | 0   | 62   |
| Tree Shrew  | 0  | 2   | 1  | 0   | 3  |
| Armenian<br>Hamster   | 2  | 5   | 0  | 0   | 5  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Dominick P. Purpura, MD  
Dean, Albert Einstein College of Medicine

11/21/03

Customer ID and Site Address:

ID: 394

Ullmann - Forchheimer

Telephone

- Chanin -Kennedy

Bldg.

1300 Morris Park Ave.

New York -Bronx, NY 10461

County: Bronx



UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0134  
CUSTOMER NUMBER: 405

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

New York City Dept Of Health  
Bureau Of Laboratories  
455 First Avenue  
New York New York, NY 10016

Telephone: (212) -447-2578

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
|   |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Mice  | -  | -   | -  | 650   | 650  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Sara T. Beatrice*

Sara T. Beatrice, Ph.D.  
Assistant Commissioner

11-20-03

OCT 27 2003

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0140  
CUSTOMER NUMBER: 398

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Rochester General Hospital  
1425 Portland Avenue  
Rochester, NY 14621

Telephone: (585) ~~338-4000~~

922-4000

585-922-3548

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   | D  |   | 36   |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   | D  |   | 62   |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   |  |   |  |   |  |
| Mice  |  |   | D  |   | 37   |
| Rats  |  |   | D  |   | 99   |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*Richard J. Langan*  
APHIS FORM 7023 (Replaces VS FORM 18-23 (OCT 88), which is obsolete.)  
( AUG 91 )

*Dr. V.A. Academic and Medical*  
10/16/03

Customer ID and Site Address:

All redactions on this page are pursuant to (b)(6) & (b)(7)(c).

ID: 398

Sahler Animal  
Research Lab.  
1425 Portland Ave.  
Rochester, NY 14621  
County: Monroe

Telephone

585

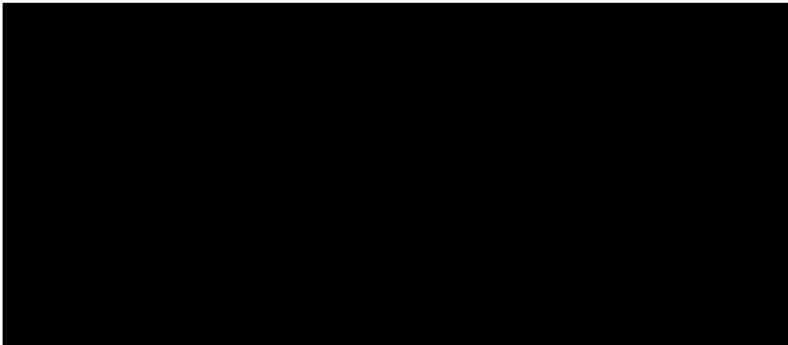
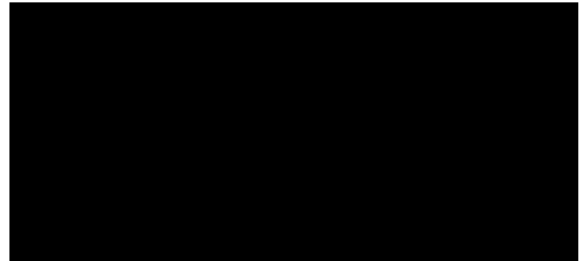
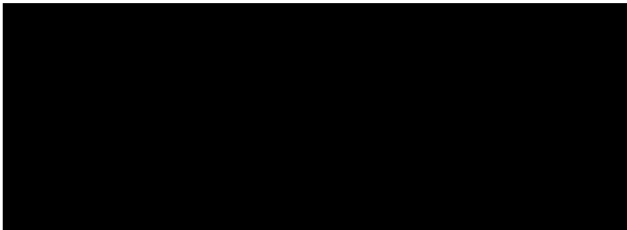
922-4000

585

922-3543

OCT 27 2003

IACUC CONTACTS:



I.D.

RICHARD GANLUM, MD

SR. VP VIA HEALTH

585-922-4806

Customer ID and Site Address:

All redactions on this page are pursuant to (b)(6) & (b)(7)(c).

OCT 27 2003

ID: 398

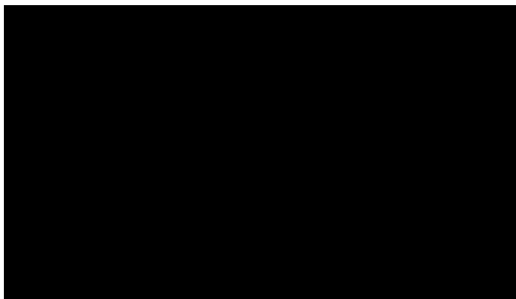
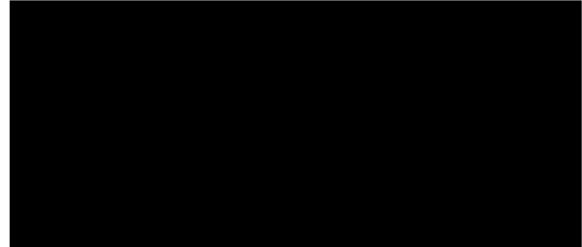
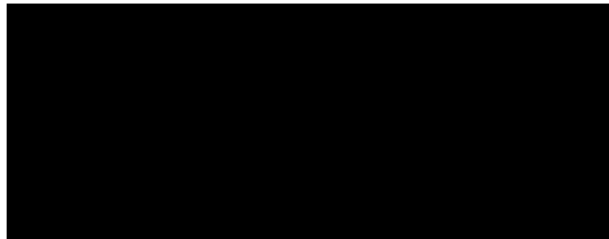
1425 Portland Ave.  
Rochester, NY 14621  
County: Monroe

Telephone

585  
922-4000

585  
922-352/3

IACUC CONTACT:



I.O.

RICHARD GIANALEMI, MD  
SR. V.P. VIA HEALTH  
585-922-4806

DEC 18 2003

This report is required by law (7 USC 2143). Failure to report according to the regulations can

See attached form for additional information

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0146  
CUSTOMER NUMBER: 410

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
( TYPE OR PRINT )

~~Institute For Cancer Prevention~~  
~~American Health Foundation~~  
~~Naylor Dana Institute~~  
1 Dana Road  
Valhalla, NY 10595

Telephone: (914)-592-2600

October 1, 2002 to September 30, 2003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )**

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred,<br>conditioned, or<br>held for use in<br>teaching,<br>testing,<br>experiments,<br>research, or<br>surgery but not yet | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no<br>pain, distress, or<br>use of pain-<br>relieving drugs. | D. Number of animals<br>upon which<br>experiments, teaching,<br>research, surgery, or<br>tests were conducted<br>involving<br>accompanying pain or<br>distress to the animals<br>and for which<br>appropriate anesthetic, a | E. Number of animals upon which teaching,<br>experiments, research, surgery or tests were<br>conducted involving accompanying pain or distress<br>to the animals and for which the use of appropriate<br>anesthetic, analgesic, or tranquilizing drugs would<br>have adversely affected the procedures, results, or<br>interpretation of the teaching, research, experiments,<br>surgery, or tests. ( An explanation of the procedures<br>producing pain or distress in these animals and the<br>reasons such drugs were not used must be attached to | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|--|---|---|--|
| 4. Dogs   |  |  |   |   |  |
| 5. Cats   |  |  |   |   |  |
| 6. Guinea Pigs  | 0  | 66   |   |   | 66   |
| 7. Hamsters   | 62   | 130  |   |   | 130  |
| 8. Rabbits  |  |  |   |   |  |
| 9. Non-human Primate  |  |  |   |   |  |
| 10. Sheep   |  |  |   |   |  |
| 11. Pigs  |  |  |   |   |  |
| 12. Other Farm Animals  |  |  |   |   |  |
| 13. Other Animals   |  |  |   |   |  |
|   |  |  |   |   |  |
|   |  |  |   |   |  |
|   |  |  |   |   |  |

**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

Dr. Daniel W. Nixon, President

12/17/03

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

( AUG 91 )

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.

FORM APPROVED  
OMB NO. 0579-0036

**CONTINUATION SHEET FOR ANNUAL REPORT  
OF RESEARCH FACILITY  
(TYPE OR PRINT)**

October 1, 2003 to September 30, 200

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

Institute For Cancer Prevention  
1 Dana Road  
Valhalla, New York 10595

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY** (Attach additional sheets if necessary or use this form.)

[illegible]

## ASSURANCE STATEMENTS

- 1). Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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- 3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL**  
(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

**SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL**

NAME &amp; TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED \_\_\_\_\_

~~Dr. Daniel W. Nixon~~

12/17/03

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0148  
CUSTOMER NUMBER: 8207

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
(TYPE OR PRINT)

Fordham University  
Fordham Rd & Bathgate Ave  
Bronx, NY 10458

Telephone: (718) -817-4650

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted involving<br>no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. (An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>(COLUMNS<br>C + D + E) |
|---|--|---|--|---|--|
| No animals<br>covered for the<br>period 10/01/03-<br>09/30/04     |  |   |  |   |  |
| 4. Dogs   |  |   |  |   |  |
| 5. Cats   |  |   |  |   |  |
| 6. Guinea Pigs  |  |   |  |   |  |
| 7. Hamsters   |  |   |  |   |  |
| 8. Rabbits  |  |   |  |   |  |
| 9. Non-human Primates   |  |   |  |   |  |
| 10. Sheep   |  |   |  |   |  |
| 11. Pigs  |  |   |  |   |  |
| 12. Other Farm Animals  |  |   |  |   |  |
| 13. Other Animals   | 0  | 0   | 0  | 0   | 0  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

John P. Lehner, Director of Research  
& Sponsored Programs

1/6/04

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0151  
CUSTOMER NUMBER: 411

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Houghton College  
Willard Drive  
Houghton, NY 14744

Telephone: (585) -567-9200

DEC 08 2003

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 0   | 0  | 0   | 0  |
| 5. Cats   | 0  | 0   | 0  | 0   | 0  |
| 6. Guinea Pigs  | 0  | 0   | 0  | 0   | 0  |
| 7. Hamsters   | 0  | 0   | 0  | 0   | 0  |
| 8. Rabbits  | 0  | 0   | 0  | 0   | 0  |
| 9. Non-human Primates   | 0  | 0   | 0  | 0   | 0  |
| 10. Sheep   | 0  | 0   | 0  | 0   | 0  |
| 11. Pigs  | 0  | 0   | 0  | 0   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0  | 0   | 0  |
|   |  |   |  |   | 0  |
| 13. Other Animals   | 0  | 0   | 0  | 0   | 0  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Daniel R. Chamberlain*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

President of Houghton College

DATE SIGNED

12/04/03



OCT 02 2003

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 211.

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0170  
CUSTOMER NUMBER: 403

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
( TYPE OR PRINT )

Siena College  
515 Loudon Road  
Loudonville, NY 12211

Telephone: (518) -783-2440

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )**

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   |  |   |  |   | 0  |
| 5. Cats   |  |   |  |   | 0  |
| 6. Guinea Pigs  |  |   |  |   | 0  |
| 7. Hamsters   | 0  | 3   | 0  | 0   | 3  |
| 8. Rabbits  |  |   |  |   | 0  |
| 9. Non-human Primates   |  |   |  |   | 0  |
| 10. Sheep   |  |   |  |   | 0  |
| 11. Pigs  |  |   |  |   | 0  |
| 12. Other Farm Animals  |  |   |  |   | 0  |
| 13. Other Animals   |  |   |  |   |  |
| Rats  | 0  | 86  | 0  | 0   | 86   |
| mice  | 0  | 50  | 0  | 0   | 50   |

**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and an Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**  
( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

*Dr. Kevin E. Mackin OFM*

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

President

DATE SIGNED

9-24-03

NOV 24 2003

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 21-R-0179  
CUSTOMER NUMBER: 413

FORM APPROVED  
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY  
( TYPE OR PRINT )

Orentreich Foundation For The  
Advancement Of Science, Inc.  
855 Route 301  
Cold Spring, NY 10516

Telephone: (845) -265-4200

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

Biomedical Research Station FACILITY LOCATIONS ( Sites ) - See Attached Listing  
Biology Laboratory

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

| A.<br><br>Animals Covered<br>By The Animal<br>Welfare Regulations | B. Number of<br>animals being<br>bred, conditioned,<br>or held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not yet<br>used for such<br>purposes. | C. Number of<br>animals upon<br>which teaching,<br>research,<br>experiments, or<br>tests were<br>conducted<br>involving no pain,<br>distress, or use of<br>pain-relieving<br>drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used. | E. Number of animals upon which teaching, experiments,<br>research, surgery or tests were conducted involving<br>accompanying pain or distress to the animals and for wh<br>the use of appropriate anesthetic, analgesic, or tranquiliz<br>drugs would have adversely affected the procedures,<br>results, or interpretation of the teaching, research,<br>experiments, surgery, or tests. ( An explanation of the<br>procedures producing pain or distress in these animals a<br>the reasons such drugs were not used must be attached<br>this report ). | F.<br><br>TOTAL NUMBER<br>OF ANIMALS<br><br>( COLUMNS<br>C + D + E ) |
|---|--|---|--|---|--|
| 4. Dogs   | 0  | 0   | 0  | 0   | 0  |
| 5. Cats   | 0  | 0   | 0  | 0   | 0  |
| 6. Guinea Pigs  | 4  | 0   | 2  | 0   | 2  |
| 7. Hamsters   | 382  | 46  | 0  | 0   | 46   |
| 8. Rabbits  | 0  | 0   | 0  | 0   | 0  |
| 9. Non-human Primates   | 0  | 0   | 0  | 0   | 0  |
| 10. Sheep   | 0  | 0   | 0  | 0   | 0  |
| 11. Pigs  | 0  | 0   | 0  | 0   | 0  |
| 12. Other Farm Animals  | 0  | 0   | 0  | 0   | 0  |
| 13. Other Animals   | 0  | 0   | 0  | 0   | 0  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |
|   |  |   |  |   |  |

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( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

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DATE SIGNED

Norman Orentreich, MD, FACP  
President and Director

11/21/03